TO: Area Facility Managers
         Area Planning Officers
         All Health System Planning Software Users
             Through: Director OEHE
                       Headquarters

FROM: Director
         Division of Facilities Planning and Construction

SUBJECT: Release of the HSP2005 Health System Planning Software

The Division of Facilities Planning and Construction (DFPC) is
pleased to announce the release of the updated Health System
Planning (HSP) process software program HSP2005. This version
has been tested thoroughly by a group of Area Planners and
Facility Management staff, including testing of thresholds and
results consistency. The group has discussed the performance of
the new version and they believe time and effort will be saved
and increased reliability achieved by adopting the HSP2005
version.

While we want to begin to use this new version immediately, it
is recognized that this is not practical in situations where
planning is well advanced. Therefore, projects developed under
the HSP2003A version which have approved health programs,
including deviations, approved RRM staffing, and completed Phase
I Site Selection, shall continue to use the HSP2003A version to
develop and finalize the Program of Requirements (POR) document.
For projects under development, where there is no approval of
health programs or RRM staffing, etc., the HSP2005 shall be used
to develop the PJD and POR. The PORs must be as complete as
possible at the time the request for PJD approval is sought. It
is recognized that the Phase II Site Selection and Evaluation
Report will not likely be completed at the time the PJD is
approved but it must be completed and approved before the POR
can be approved.

Once the PJD has been approved, the agency will not process
amendments for services, staff, space, etc., unless there is a
substantial change in demographics that warrants
reconsideration. Documents may be changed, if errors of math or
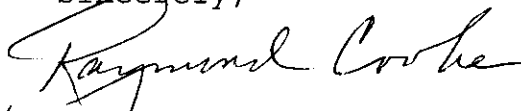syntax are detected.

The major changes in the new HSP2005 version can be viewed in Attachment A. Please note that this version continues to use the 2004 user population. At some future date, the user population in the HSP2005 version will be updated via a patch. Users of HSP will need to monitor the website below for when this patch and future patches become available. The HSP2005 software may be downloaded from the following website:

http://www.dfpc.ihs.gov//HSP

Any user encountering problems or difficulties with HSP2005 is encouraged to look first on the website above for possible solutions. You may also direct your questions to either Mr. Gerald Inglett of the Division of Engineering Services, Dallas, TX at (214)767-3898 or to CDR John Longstaff, DFPC, Rockville, MD at (301)443-1851.

I request that you provide feedback to these individuals as you use this new version.

Sincerely,

for Jose F. Cuzme, P.E.

Attachment

The following are changes to the HSP2003A and are incorporated into the HSP2005 version.

1. The Small Ambulatory Care Facilities criterion was completed and was incorporated into the HSP system.

2. The elimination of gaps in the workload ranges.

3. The 2005 version of the HSP updated several disciplines. The discipline updates added 41-Primary Care templates, 16-Dental Care templates, 3-Pharmacy templates, 1-Facility Management template, 6-Property & Supply templates, and 11-Acute Care templates for a total of 78 new discipline templates. The addition of these new templates required that the threshold relationship database be adjusted. The discipline threshold relationships and requirements were verified followed by adjustments as needed.

4. The system was modified to allow the generation of a space program based on room templates. Following a review of the space program, the system now allows the planner to modify and adjust changes in the space program.

5. The system was modified to allow generation of RRM staffing, thereby eliminating disagreements between RRM and HSP staffing results. After the staffing has been reviewed, the system allows the planner to modify the staff distribution. Please note that the RRM staffing for space and budget will continue to be validated through the Division of Planning, Evaluation and Research using the latest version of the stand-alone RRM found at:

http://www.ihs.gov/NonMedicalPrograms/PlanningEvaluation/pe-facilities-planning.asp#rrm.

6. Miscellaneous improvements and adjustments to the system's operation and appearance including additional help screens and files were made.